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CONFIRMATION NO. 5367

SERIAL NUMBER 10/623,914	FILING OR 371(c) DATE 07/21/2003 RULE	CLASS 435	GROUP ART UNIT 1636	ATTORNEY DOCKET NO. 27708/03905	
APPLICANTS Thomas M. Hering, Shaker Heights, OH; Brian Johnstone, Shaker Heights, OH; ** CONTINUING DATA ***** <i>OL GD</i> This application is a DIV of 09/881,578 06/14/2001 PAT 6,596,855 which claims benefit of 60/211,384 06/14/2000 ** FOREIGN APPLICATIONS ***** <i>GD</i> <i>NONE</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/20/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and <i>GD</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY OH	SHEETS DRAWING 15	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 10
ADDRESS 24024					
TITLE Probes for chondrogenesis					
FILING FEE RECEIVED 732	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		